Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Angela First name Christine Middle name Kent Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Angela Wilson	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9640	

Debtor 1 Angela Christine Kent

_ '	
Case number (if known)	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	8616 Ria Formosa Way Elk Grove, CA 95757 Number, Street, City, State & ZIP Code Sacramento County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 1 Chapter 1	Jebio							
7. The chapter of the Bankruptcy Code you are choosing to file under Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Inc. (Form 2010)). Also, go to the top of page 1 and check the appropriate box. (Chapter 1								
Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 1	Part 2							
Chapter 17 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 14 Chapter 13 Chapter 14 Chapter 15 Chapter 13 Chapter 14 Chapter 15 Chapter 14 Chapter 15 Chapter 15 Chapter 16 Chapter 16 Chapter 17 Chapter 17 Chapter 18 Chapter 16 Chapter 17 Chapter 18 Chapter 18 Chapter 19 Chapte	В	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
Chapter 12 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 13 Chapter 14 Chapter 15 Chapter 16 Chapter 17 Chapter 15 Chapter 16 Chapter 17 Chapter 16 Chapter 17 Chapter 19 Chapte	С							
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If you rattorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Apther filing Fee in installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for but its not required to, waive your fee, and may do so only if your income is less than 15 applies to your framily size and you are unable to pay the fee in installments. If you choose this option only if you are filing for but its not required to, waive your fee, and may do so only if your income is less than 15 applies to your framily size and you are unable to pay the fee in installments. If you choose this option only if you are filing for but its not required to, waive your fee, and may do so only if your income is less than 15 applies to your fee and you are unable to pay the fee in installments. If you choose this option is you are filing for but its not required to, waive your fee, and may do so only if your income is less than 15 applies to your fee in installments. If you choose this option only if you income is less than 15 applies to your fee in installments. If you choose this option only if you income is less than 15 applies to your fee and you are unable to you feel fee in installments. If you choose this option only if you income is less than 15 applies to your feel filing for less than 15 applies to your feel filing for feel in installments. If you choose this option only if you income is less than 15 applies to your feel filing for feel filing for feel in installments. If you choose this option only if you income is less than 15 applies to your feel feel in installments. If you choose this option only if you income is less than 15 applies to your								
8. How you will pay the fee								
about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If your attorney is submitting your payment on your behalf, your attorney may pay pay perinted address. need to pay the fee in installments. If you choose this option, sign and attach the Ar The Filling Fee in Installments (Official Form 103A). request that my fee be waived (You may request this option only if you are filling for but is not required to, waive your fee, and may do so only if your income is less than 15 applies to your family size and you are unable to pay the fee in installments). If you choose this option only if you are filling for but is not required to, waive your fee, and may do so only if your income is less than 15 up to the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applies to your family size and you are unable to pay the fee in installments). If you choose this option only if you are filling for but is not required to, waive your fee, and may do so only if your income is less than 15 you choose this option only if you are filling for but is not required to, waive your fee, and may do so only if your income is less than 15 you choose this option only if you are filling for but is not required to, waive your fee, and may do so only if you income is less than 16 you for income is less than 16 you required to, waive your fee, and may do so only if you income is less than 16 you required to, waive your fee, and may do so only if you income is less than 16 you required to, waive your fee, and may do so only if you are filling for but is not required to, waive your fee, and may do so only if you income is less than 16 you required to, waive your fee, and may do so only if you income is less than 16 you required to, waive your fee, and may do so only if you income is less than 16 you required to, waive your fee, and may do so only if you recome is like the Application to the Application to Have the Chapter 7 Filing Fee Waive do (Official Form 103A).								
The Filing Fee in Installments (Official Form 103A). Trequest that my fee be walved (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 15 applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applies to your family size and you are unable to pay the fee in installments if your fee, and may do so only if your income is less than 15 applies. If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it was applied to pay the fee in installments in the same pay to choose and you are unable to pay the fee in installments in the pay the Case numb applies to your family size and you are unable to pay the fee in installments in the pay the Case numb applies to your family size and you are unable to pay the fee in installments. If you cho the Application to Pay the Men	3. H	ay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details now you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money fryour attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with						
request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 15 applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it 9. Have you filed for bankruptcy within the last 8 years? No.		ation for Individuals to Pay						
but is not required to, waive your fee, and may do so only if your income is less than 15 applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it 9. Have you filed for bankruptcy within the last 8 years? No.		intor 7. Pullow, a judgo may						
bankruptcy within the last 8 years? District When Case num District When Case num No Case num Case numb No Case numb		of the official poverty line that this option, you must fill out						
last 8 years? Yes. District								
District When Case num District When Case num District When Case num 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship District When Case numb Debtor Relationship District When Case numb Relationship District When Case numb Relationship District When Case numb The poyou rent your residence? No. Go to line 12. Has your landlord obtained an eviction judgment against you?								
District When Case num 10. Are any bankruptcy cases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? Debtor Relationship District When Case numb Debtor Relationship District When Case numb The property of the pr								
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship District When Case numb Poistrict When Case numb Relationship District When Case numb Poistrict When Case numb Relationship District When Case numb Relationship District When Has your landlord obtained an eviction judgment against you?								
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Debtor No. D								
filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Debtor District When Case numb Debtor District When Case numb No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you?		-						
District When Case numb Debtor No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you?	fi n y p							
Debtor District When Case numb 11. Do you rent your residence? No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you?		you						
District When Case numb 11. Do you rent your residence? No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you?		f known						
11. Do you rent your residence? No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you?		you						
residence? Yes. Has your landlord obtained an eviction judgment against you?		i known						
☐ Yes. Has your landlord obtained an eviction judgment against you?								
No. Co to line 12								
□ No. Go to line 12.								
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (F this bankruptcy petition.		101A) and file it as part of						

Deb	otor 1 Angela Christine	Kent			Case number (if known)	
Par	Report About Any Bu	sinesses	You Owr	ı as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of bus	siness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Stat	te & ZIP Code	
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:	
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?					
	For a definition of small	■ No.	I am ı	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				_
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety? Or do you own any		What is	the hazard?		_
	property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
	-				Number, Street, City, State & Zip Code	
						_

Debtor 1 Angela Christine Kent

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Angela Christine Kent Case number (if known)							
Par	t 6: Answer These Quest	ions for Repo	orting Purposes				
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose."				
			No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. St	ate the type of debts you o	owe that are not consumer de	bts or business debts		
17.	Are you filing under Chapter 7?	■ No. I a	m not filing under Chapter	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any vailable to distribute to unsecu		cluded and administrative expenses	
	administrative expenses		No				
	are paid that funds will be available for distribution to unsecured		Yes				
	creditors?						
18.	How many Creditors do	1 -49		1 ,000-5,000		25,001-50,000	
	you estimate that you owe?	□ 50-99		5001-10,000		50,001-100,000	
		□ 100-199 □ 200-999		□ 10,001-25,000	Ш	More than100,000	
19.	How much do you	□ \$0 - \$50,	000	□ \$1,000,001 - \$10 n	million 🔲 :	\$500,000,001 - \$1 billion	
	estimate your assets to be worth?	\$50,001		\$10,000,001 - \$50		\$1,000,000,001 - \$10 billion	
		□ \$100,001 - \$500,000 ■ \$500,001 - \$1 million		□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		\$500,001	- \$1 million	— \$100,000,001 - \$30		wore than 450 billion	
20.	How much do you	□ \$0 - \$50,		□ \$1,000,001 - \$10 n		\$500,000,001 - \$1 billion	
	estimate your liabilities to be?	\$50,001		\$10,000,001 - \$50		\$1,000,000,001 - \$10 billion	
		□ \$100,001 ■ \$500,001		□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		\$10,000,000,001 - \$50 billion More than \$50 billion	
		— \$300,001	- \$1 mmon				
Par	t7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
				7, I am aware that I may proce relief available under each cha		napter 7, 11,12, or 13 of title 11, proceed under Chapter 7.	
				not pay or agree to pay some ne notice required by 11 U.S.C		ney to help me fill out this	
		I request reli	ef in accordance with the	chapter of title 11, United Stat	tes Code, specified in th	nis petition.	
		bankruptcy of and 3571.	case can result in fines up			y by fraud in connection with a poth. 18 U.S.C. §§ 152, 1341, 1519,	
			Christine Kent ristine Kent	Signs	ature of Debtor 2		
		Signature of		Signa	ature of Deptol 2		
		Executed on	July 8, 2019	Exec	uted on		
			MM / DD / YYYY		MM / DD / Y	YYY	

lieu 07/08/19	Case 19-	Case 19-24294		טט	
Debtor 1 Angela Christine	Kent	Cas	se number (if known)		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this pet under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify that	States Code, and have e	explained the relief available ur	nder each chapter	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, conschedules filed with the petition is incorrect.	ertify that I have no know	vledge after an inquiry that the	, ,	
	/s/ Mo Mokarram Signature of Attorney for Debtor	Date	July 8, 2019 MM / DD / YYYY		
	Mo Mokarram Printed name				
	Law Office of Mo Mokarram				
	1101 Fulton Avenue				
	Sacramento, CA 95825 Number, Street, City, State & ZIP Code				

Email address

mo@sacbkhelp.com

Contact phone 888.588.0040

258093 CA Bar number & State Certificate Number: 15725-CAE-CC-033074209



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>July 8</u>, 2019, at <u>12:57</u> o'clock <u>PM EDT</u>, <u>Angela Kent</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>Eastern District of California</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: July 8, 2019 By: /s/Jonathan Todd

Name: Jonathan Todd

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Fill in this information to identify your case:						
Debtor 1	Angela Christine	Angela Christine Kent				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT O	DF CALIFORNIA			
Case number						
(if known)						

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 525.000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 96.304.00 1c. Copy line 63, Total of all property on Schedule A/B..... 621,304.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 523.560.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 30,000.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 87,132.00 Your total liabilities \$ 640.692.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 8,977.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 6,827.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Angela Christine Kent

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,213.33

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	30,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	1.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	30,001.00

07/08/19	Case 19-24294			
Fill in this information to identify your case and thi	is filing:			
Debtor 1 Angela Christine Kent First Name Middle	Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle				
United States Bankruptcy Court for the: EASTERN I	DISTRICT OF CALIFORNIA			
Case number			С	Check if this is an amended filing
Official Form 106A/B Schedule A/B: Property				12/15
n each category, separately list and describe items. List a think it fits best. Be as complete and accurate as possible information. If more space is needed, attach a separate sh Answer every question. Part 1: Describe Each Residence, Building, Land, or Oth	e. If two married people are filing together, both are elect to this form. On the top of any additional pages,	qually respon	nsible for supp	ne category where you olying correct
No. Go to Part 2.■ Yes. Where is the property?	What is the property? Check all that apply			
8616 Ria Formosa Way Street address, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount o	f any secured o	ns or exemptions. Put claims on <i>Schedule D:</i> Secured by Property.
Elk Grove CA 95757-0000 City State ZIP Code	☐ Manufactured or mobile home☐ Land☐ Investment property	Current valuentire prope		Current value of the portion you own? \$525,000.00
	☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one ☐ Debtor 1 only		simple, tenan	ur ownership interest acy by the entireties, or
Sacramento County	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this item property identification number:	(see instr	uctions)	unity property
Add the dollar value of the portion you own for pages you have attached for Part 1. Write that i			>	\$525,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debte	or 1 Angela Christine Ke	ent		Case number (if known)	
3. Ca	ırs, vans, trucks, tractors, spo	rt utility ve	hicles, motorcycles		
	No				
•	Yes				
3.1	Make: Mazda Model: 3 Year: 2013		Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
	Approximate mileage: Other information:	115,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
			■ Check if this is community property (see instructions)	\$6,860	9.00 \$6,860.00
3.2	Make: Jeep Model: Rangler Year: 2007 Approximate mileage: Other information:	83,000	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property. the Current value of the portion you own?
			Check if this is community property (see instructions)	\$5,200	\$5,200.00
3.3	Make: Tundra Model: Toyota		Who has an interest in the property? Check one Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
	Year: 2015 Approximate mileage: Other information:	80,000	□ Debtor 2 only□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Current value of entire property?	the Current value of the portion you own?
	Car is in non-filing spous name only and he lives in Cruz and makes the payr himself. Loan on car wor around \$24,000, but purcafter the marriage.	n Santa ments th	■ Check if this is community property (see instructions)	\$21,000	\$21,000.00
Exa ■	amples: Boats, trailers, motors,		ad other recreational vehicles, other vehicles attercraft, fishing vessels, snowmobiles, motorcycles		
			rn for all of your entries from Part 2, including that number here		\$33,060.00
Part 3			ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> >	busehold goods and furnishin xamples: Major appliances, furn No Yes. Describe		, china, kitchenware		одино от елетірионо.
		ehold goo	ds & furnishings		\$3,000.00

Debtor 1	Angela Christine Kent	Case number (if known)
	onics oles: Televisions and radios; audio, video, stereo, and digi including cell phones, cameras, media players, game		collections; electronic devices
□ No ■ Yes	Describe		
100	<u></u>		¢4 000 00
	Cell phone and computers		\$1,000.00
	tibles of value oles: Antiques and figurines; paintings, prints, or other artw other collections, memorabilia, collectibles	vork; books, pictures, or other art objects; stamp, coi	n, or baseball card collections;
	. Describe		
Exam _i ■ No	nent for sports and hobbies oles: Sports, photographic, exercise, and other hobby equi musical instruments Describe	ipment; bicycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
■ No	rms nples: Pistols, rifles, shotguns, ammunition, and related eq	uipment	
□ No	es nples: Everyday clothes, furs, leather coats, designer wear Describe	r, shoes, accessories	
	Clothing		\$1,000.00
□ No	Iry nples: Everyday jewelry, costume jewelry, engagement rin . Describe	gs, wedding rings, heirloom jewelry, watches, gems,	gold, silver
	Jewelry		\$5,000.00
Exar ■ No	arm animals nples: Dogs, cats, birds, horses . Describe		
■ No	other personal and household items you did not alread Give specific information	ly list, including any health aids you did not list	
	the dollar value of all of your entries from Part 3, inclu Part 3. Write that number here		\$10,000.00
Part 4: D	escribe Your Financial Assets		
Do you o	wn or have any legal or equitable interest in any of the	e following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash	anlog Manager and house in the second	of densit have and as hard-where were file	ition
∟xar	nples: Money you have in your wallet, in your home, in a sa	aie deposit box, and on nand when you tile your pet	IUON

☐ No

Debtor 1 Angela Chris	stine Ke	ent	Case number (if known)	
■ Voc				
_ 163			Cash	\$200.00
			certificates of deposit; shares in credit unions, brokerage h the same institution, list each. Institution name:	ouses, and other similar
	17.1.	Checking/Savings	USAA Joint Account	\$200.00
	17.2.	Checking/Savings	Capital One 360	\$43.00
	17.3.	Credit Union	Bay Federal Credit Union	\$100.00
	17.4.	Checking/Savings	Citibank	\$600.00
	17.5.	Credit Union	Hereitage Credit Union	\$1,200.00
Examples: Bond funds, ☐ No ■ Yes		Institution or issuer name Apple Stock	ge firms, money market accounts	\$300.00
19. Non-publicly traded stage joint venture ■ No	ock and	interests in incorporate	d and unincorporated businesses, including an interest	in an LLC, partnership, and
☐ Yes. Give specific infe		about them me of entity:	% of ownership:	
Negotiable instruments	include pents are	personal checks, cashiers those you cannot transfer	e and non-negotiable instruments ' checks, promissory notes, and money orders. ' to someone by signing or delivering them.	
21. Retirement or pension Examples: Interests in I No Yes. List each accoun	IRA, ERI	SA, Keogh, 401(k), 403(b)	յ, thrift savings accounts, or other pension or profit-sharing բ	olans
	•	of account:	Institution name:	
	Pens	sion	Calpers pension	\$1.00
	401(I	x)	401K with State of CA	\$32,000.00
	457		457 Plan with State of CA	\$18,600.00

De	ebtor 1	Angela Christine	e Kent		Case number (if kno	wn)	
	Your sh		posits you have made so th	nat you may continue servic ublic utilities (electric, gas, w	ce or use from a company vater), telecommunications com	npanies, or othe	ers
				Institution name or ind	ividual:		
	Annuitie ■ No □ Yes		periodic payment of money name and description.	to you, either for life or for a	a number of years)		
	26 U.S.C ■ No	:. §§ 530(b)(1), 529A	(b), and 529(b)(1).		under a qualified state tuition		
	☐ Yes	Institut	tion name and description.	Separately file the records	of any interests.11 U.S.C. § 52	1(c):	
	Trusts, ■ No	equitable or future	interests in property (oth	er than anything listed in	line 1), and rights or powers	exercisable fo	or your benefit
	☐ Yes. (Give specific informa	ation about them				
	Exampl ■ No		names, websites, proceeds	other intellectual properts from royalties and licensin			
	Exampl ■ No				liquor licenses, professional lic	enses	
M	oney or p	roperty owed to yo	ou?			portio Do no	ent value of the on you own? ot deduct secured s or exemptions.
	■ No	inds owed to you	tion about them, including v	whether you already filed th	e returns and the tax years		
	■ No			oport, child support, mainter	nance, divorce settlement, prop	erty settlement	
	Example No		lisability insurance paymen loans you made to someor		ay, vacation pay, workers' con	npensation, Soc	cial Security
		s in insurance polices: Health, disability		avings account (HSA); cred	it, homeowner's, or renter's ins	urance	
		lame the insurance	company of each policy and Company name:	d list its value.	Beneficiary:	Surr valu	ender or refund e:
	If you a someon				olicy, or are currently entitled to	receive propert	ty because

Del	btor 1	Angela Christine Kent		Case number (if known)	
33.		against third parties, whether or not you have filed a law bles: Accidents, employment disputes, insurance claims, or ri		and for payment	
_	■ No □ Yes.	Describe each claim			
	Other o	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to	set off claims
[☐ Yes.	Describe each claim			
_		ancial assets you did not already list			
	■ No	Circa and difficulty and the			
١	⊔ Yes.	Give specific information			
36.		he dollar value of all of your entries from Part 4, includin art 4. Write that number here			\$53,244.00
Par	t 5: De	scribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ite in Part 1.	
37.	Do you	own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. C	So to line 38.			
	If y	scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.			
46.	`	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	_	Go to Part 7.			
	□ Yes	. Go to line 47.			
Par	rt 7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
	_Exam _l	have other property of any kind you did not already list bles: Season tickets, country club membership	?		
_	■ No				
١	⊔ Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
				L	
Par	t 8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$525,000.00
56.	Part 2	2: Total vehicles, line 5	\$33,060.00		
57.	Part 3	3: Total personal and household items, line 15	\$10,000.00		
58.	Part 4	l: Total financial assets, line 36	\$53,244.00		
59.	Part !	: Total business-related property, line 45	\$0.00		
60.	Part 6	3: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	': Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$96,304.00	Copy personal property to	tal \$96,304.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$621,304.00

Fill in this information to identify your case:							
Angela Christine	Kent						
First Name	Middle Name	Last Name					
First Name	Middle Name	Last Name					
nkruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA					
				☐ Check if this is an			
				amended filing			
	Angela Christine First Name	Angela Christine Kent First Name Middle Name First Name Middle Name	Angela Christine Kent First Name Middle Name Last Name First Name Middle Name Last Name	Angela Christine Kent First Name Middle Name Last Name First Name Middle Name Last Name			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	aim as Exempt
---------------------------------------	---------------

1.	Which set of exemptions are you claiming	? Check one only	, even if you	ır spouse is fi	iling with	you.
----	--	------------------	---------------	-----------------	------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of portion you own		ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
8616 Ria Formosa Way Elk Grove, CA 95757 Sacramento County	\$525,000.00		\$1,441.00	C.C.P. § 703.140(b)(5)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2013 Mazda 3 115,000 miles	\$6,860.00		\$5,850.00	C.C.P. § 703.140(b)(2)	
Ellie Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit		
2013 Mazda 3 115,000 miles Line from <i>Schedule A/B</i> : 3.1	\$6,860.00		\$1,010.00	C.C.P. § 703.140(b)(5)	
Line Holli Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit		
2007 Jeep Rangler 83,000 miles Line from Schedule A/B: 3.2	\$5,200.00		\$5,200.00	C.C.P. § 703.140(b)(5)	
Line from Schedule AVD. 3.2			100% of fair market value, up to any applicable statutory limit		
Household goods & furnishings Line from Schedule A/B: 6.1	\$3,000.00		\$3,000.00	C.C.P. § 703.140(b)(3)	
LINE HOIN SCHEUUIE A/D. U. I			100% of fair market value, up to any applicable statutory limit		

or 1 Angela Christine Kent	Commant colors of the		Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
Cell phone and computers	Schedule A/B \$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(3)
Line from <i>Schedule A/B</i> : 7.1	ψ1,500.00	_	100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$5,000.00		\$1,750.00	C.C.P. § 703.140(b)(4)
			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$5,000.00	•	\$3,250.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$200.00		\$200.00	C.C.P. § 703.140(b)(5)
Elle Holli Goriedale 772. 1911			100% of fair market value, up to any applicable statutory limit	
Checking/Savings: USAA Joint Account	\$200.00		\$200.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Checking/Savings: Capital One 360 Line from Schedule A/B: 17.2	\$43.00	•	\$43.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Credit Union: Bay Federal Credit Union	\$100.00		\$100.00	C.C.P. § 703.140(b)(5)
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Checking/Savings: Citibank Line from Schedule A/B: 17.4	\$600.00		\$600.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Credit Union: Hereitage Credit Union Line from Schedule A/B: 17.5	\$1,200.00		\$1,200.00	C.C.P. § 703.140(b)(5)
-			100% of fair market value, up to any applicable statutory limit	
Apple Stock Line from Schedule A/B: 18.1	\$300.00		\$300.00	C.C.P. § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Pension: Calpers pension Line from Schedule A/B: 21.1	\$1.00		\$1.00	C.C.P. § 703.140(b)(10)(E)
			100% of fair market value, up to any applicable statutory limit	

De	ebtor 1 Angela Christine Kent		Case number (if known)					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	401(k): 401K with State of CA Line from Schedule A/B: 21.2	\$32,000.00		\$32,000.00	C.C.P. § 703.140(b)(10)(E)			
	Line Holli Schedule A/B. 21.2			100% of fair market value, up to any applicable statutory limit				
	457: 457 Plan with State of CA Line from Schedule A/B: 21.3	\$18,600.00		\$18,600.00	C.C.P. § 703.140(b)(10)(E)			
	Line Holli Golleddie PAB. 21.0			100% of fair market value, up to any applicable statutory limit				
3.	, ,	re you claiming a homestead exemption of more than \$170,350? Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) No						
	_ , , , , ,	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?						
	□ No □ Yes							

			3 2			
Fill i	n this informa	ation to identify you	ır case:			
Debt	or 1	Angola Christin	o Kont			
Debt	.01 1	Angela Christin	Middle Name Last Name		-	
Debt	or 2 se if, filing)	First Name	Middle Name Last Name		-	
` '	. 3,	cruptcy Court for the				
Office	o otates barr	dupley Court for the	ENOTERIN DIGITION OF CHEN CHAIN		-	
Case (if known	e number					if this is an ded filing
	cial Form		s Who Have Claims Secure	d by Propert	V.	12/15
<u> </u>	icuaic L	o. Creditors	Who have claims Secure	a by Fropert	<u>y</u>	12/13
is nee			If two married people are filing together, both are e out, number the entries, and attach it to this form.			
1. Do a	any creditors h	ave claims secured by	y your property?			
	☐ No. Check t	his box and submit t	his form to the court with your other schedules. '	You have nothing else t	o report on this form.	
	Yes. Fill in a	all of the information	below.			
Part	1 I ist All	Secured Claims				
			more than one secured claim, list the creditor separate	Column A	Column B	Column C
for ea	ach claim. If mor	e than one creditor has	s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Home Poin Corporation		Describe the property that secures the claim:	\$523,559.00	\$525,000.00	\$0.00
		spondence	8616 Ria Formosa Way Elk Grove, CA 95757 Sacramento County			
	Dept 11511 Luna 200	Road; Suite	As of the date you file, the claim is: Check all that apply.			
	Farmers Br 75234	anch, TX	☐ Contingent			
		City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who	owes the deb	t? Check one.	Nature of lien. Check all that apply.			
	ebtor 1 only ebtor 2 only		An agreement you made (such as mortgage or se car loan)	ecured		
	ebtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_		debtors and another	☐ Judgment lien from a lawsuit			
	heck if this clai community debt		Other (including a right to offset)			
		Opened 12/18 Last				

Last 4 digits of account number

5988

Active

Date debt was incurred 6/01/19

Debtor 1 Angela Christine Kent	Case number (_{if known})			
First Name Middle N	Name Last Name			
2.2 IRS	Describe the property that secures the claim:	\$1.00	\$1.00	\$0.00
Creditor's Name	Personal property lien			
PO Box 7346 Philadelphia, PA 19101	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$523,560.00		
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$523,560.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fil	I in this information to identify	your case:					
De	btor 1 Angela Chri	stine Kent					
	First Name	Mido	dle Name	Last Name			
	btor 2 ouse if, filing) First Name	Midd	dle Name	Last Name			
` '	. 6,						
Un	ited States Bankruptcy Court for	r the: EASTER	RN DISTRICT OF CAL	IFORNIA			
Ca	se number						
(if k	nown)					☐ Check	if this is an
						amend	ed filing
∩f	ficial Form 106E/F						
_	hedule E/F: Credito	rs Who Hay	ve Unsecured	Claims			12/15
	as complete and accurate as possi				or creditors with NON	PRIORITY claims. Li	
any	executory contracts or unexpired	leases that could	result in a claim. Also li	ist executory contrac	ts on Schedule A/B: P	roperty (Official For	m 106A/B) and on
	edule G: Executory Contracts and edule D: Creditors Who Have Clair						
eft.	Attach the Continuation Page to t						
	ne and case number (if known).						
	rt 1: List All of Your PRIOR						
1.	Do any creditors have priority un	isecured claims ag	jainst you?				
	No. Go to Part 2.						
	Yes.						
2.	List all of your priority unsecured identify what type of claim it is. If a d						
	possible, list the claims in alphabeti Part 1. If more than one creditor hol				wo priority unsecured cla	aims, fill out the Contir	nuation Page of
	(For an explanation of each type of	•					
	(1 of all explanation of each type of	ciairi, see trie iristi		instruction bookiet.)	Total claim	Priority	Nonpriority
2.1	Franchica Tay Board		Last Adiates of account		¢2.700.00	amount	amount
2.1	Priority Creditor's Name		Last 4 digits of accou	nt number	\$2,700.00	\$2,000.00	\$700.00
	PO Box 2952		When was the debt in	curred?		_	
	Sacramento, CA 95812		A	the alaim is Obselv	-II 4b -4b		
	Number Street City State Zip C Who incurred the debt? Check of		As of the date you file	, the claim is: Check	ан тат арргу		
	■ Debtor 1 only	5110.	☐ Contingent				
			Unliquidated				
	☐ Debtor 2 only		Disputed				
	☐ Debtor 1 and Debtor 2 only		Type of PRIORITY uns				
	At least one of the debtors and	d another	☐ Domestic support of	bligations			
	☐ Check if this claim is for a c	ommunity debt	Taxes and certain o				
	Is the claim subject to offset?		☐ Claims for death or	personal injury while y	ou were intoxicated		
	■ No		Other. Specify				
	Yes						
2.2	IRS		Last 4 digits of accou	nt number	\$27,300.00	\$12,400.00	\$14,900.00
	Priority Creditor's Name	-			Ψ21,000.00	Ψ12,400.00	Ψ14,000.00
	PO Box 7346		When was the debt in	curred?		-	
	Philadelphia, PA 1910 ^o Number Street City State Zip C		As of the date you file	the claim is: Check	all that apply		
	Who incurred the debt? Check of		☐ Contingent	,	an anat apply		
	■ Debtor 1 only		☐ Unliquidated				
			_				
	Debtor 2 only		☐ Disputed Type of PRIORITY uns	secured claim:			
	Debtor 1 and Debtor 2 only						
	At least one of the debtors and		☐ Domestic support of				
	☐ Check if this claim is for a c	ommunity debt	Taxes and certain o		-		
	Is the claim subject to offset?		Claims for death or	personal injury while y	ou were intoxicated		
	■ No		Other. Specify				
	☐ Yes		Ia	ixes			

Debte	or 1 Angela Christine Kent		Case number (if known)	
Part	2: List All of Your NONPRIORITY Unsecu	red Claims		
3. D	o any creditors have nonpriority unsecured claim	s against you?		
Г	No. You have nothing to report in this part. Submit t	his form to the court with your other sch	edules.	
	3 , ,	,		
	Yes.			
u th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each clan one creditor holds a particular claim, list the other	aim. For each claim listed, identify what	type of claim it is. Do not list claims already inc	luded in Part 1. If more
Р	Part 2.			Total claim
	A ffines he a	l	EV07	
4.1	Affirm Inc Nonpriority Creditor's Name	Last 4 digits of account number	FY9Z	\$2,880.00
	Affirm Incorporated		Opened 01/19 Last Active	
	Po Box 720	When was the debt incurred?	4/23/19	_
	San Francisco, CA 94104 Number Street City State Zip Code	As of the date you file, the claim	is: Chock all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Unsecured		-
4.2	Amex	Last 4 digits of account number	3953	\$8,055.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 01/16 Last Active 6/14/19	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	0 0 1	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar dobts	
	■ No			
	☐ Yes	Other. Specify Credit Card	1	_

Debtor	1 Angela Christine Kent		Case number (if known)		
4.3	Capital One	Last 4 digits of account number		\$10,029.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 04/12 Last Active 6/05/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.4	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6355	\$2,164.00	
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 01/11 Last Active 5/13/19		
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	\square Debts to pension or profit-sharing plans, and other similar debts		
	□Yes	Other. Specify Credit Card	<u> </u>		
4.5	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	0415	\$1,852.00	
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 07/18 Last Active 6/15/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	■ Other Specify Credit Card	I		

Debto	Angela Christine Kent	Case number (if known)				
4.6	Citibank	Last 4 digits of account number	2304	\$4,022.00		
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 01/16 Last Active 6/03/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.7	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	8995	\$891.00		
	Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 07/18 Last Active 5/12/19			
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	No	☐ Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.8	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	2727	\$1,320.00		
	Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 01/16 Last Active 6/06/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing				
	□Yes	■ Other, Specify Charge Acc	count			

Debto	or 1 Angela Christine Kent		Case number (if known)		
4.9	Credit One Bank	Last 4 digits of account number	5541	\$901.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 03/15 Last Active 6/14/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other Specify Credit Card	<u> </u>		
4.1	Credit One Bank	Last 4 digits of account number	6242	\$231.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 09/17 Last Active 6/14/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit Card	l		
4.1	Discover Financial	Last 4 digits of account number	8377	\$2,460.00	
1	Nonpriority Creditor's Name				
	Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 03/17 Last Active 6/14/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□Yes	Other Specify Credit Card	I		

Debtor	1 Angela Christine Kent	Case number (if known)			
4.1	FedLoan Servicing	Last 4 digits of account number	0006	\$1.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 09/17 Last Active 11/12/18		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify			
		Educationa	<u>l</u>		
4.1	LendingClub	Last 4 digits of account number	5089	\$29,167.00	
3	Nonpriority Creditor's Name Attn: Bankruptcy 71 Stevenson St, Ste 1000	When was the debt incurred?	Opened 02/18 Last Active 4/02/19	Ψ20,101.00	
	San Francisco, CA 94105	when was the dept incurred?	4/02/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt ☐ Obligations arising out of a separa report as priority claims		ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify Unsecured			
4.1	Pay Pal Credit	Last 4 digits of account number		\$400.00	
	Nonpriority Creditor's Name PO Box 105658 Atlanta. GA 30348	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ Disputed				
	☐ At least one of the debtors and another	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other Specify Loan			

Debtor	Angela Christine Kent	Case number (if known)			
4.1 5	Synchrony Bank/Gap	Last 4 digits of account number	2590	\$4,458.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 04/18 Last Active 5/17/19 s: Check all that apply		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	ration agreement or divorce that you did not g plans, and other similar debts		
4.1	Synchrony/Ashley Furniture Homestore	Last 4 digits of account number	9759	\$5,631.00	
	Nonpriority Creditor's Name C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 08/14 Last Active 6/13/19		
Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not		
	Yes	Other. Specify Charge Acc			
4.1	USAA Federal Savings Bank Nonpriority Creditor's Name	Last 4 digits of account number	3143	\$12,670.00	
	Attn: Bankruptcy 10750 Mcdermott Freeway San Antonio,, TX 78288	When was the debt incurred?	Opened 01/16 Last Active 5/19/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Credit Card			

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Angela Christine Kent

Case number (if known)

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 30,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 30,000.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 1.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		2.22
	J	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 87,131.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 87,132.00

Fill in this inforr	nation to identify your	case:		
Debtor 1	Angela Christine Kent			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F CALIFORNIA	
Case number _				

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	Jity		Oldio	211 OOGC	

01700713		Ouc	00 10 2-20-		
Fill in this inf	formation to identify your	case:			
Debtor 1	Angela Christine				
D. I	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF	CALIFORNIA		
Case number (if known)					☐ Check if this is an
	Form 106H le H: Your Cod	ebtors			amended filing
people are fili ill it out, and	ng together, both are equ	ally responsible for supply boxes on the left. Attach t	ring correct information	n. If more space is	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do you	u have any codebtors? (If	you are filing a joint case, do	not list either spouse as	s a codebtor.	
□ No ■ Yes					
		ı lived in a community prop Nevada, New Mexico, Puer			ty states and territories include)
□ No. Go ■ Yes. D		use, or legal equivalent live v	vith you at the time?		
□ ■	No Yes.				
	In which community state Kelly Kent 83B Grandview Stree Santa Cruz, CA 9506 Name of your spouse, former sp Number, Street, City, State & Zir	ouse, or legal equivalent	California	Fill in the name a Non-filing	and current address of that person. g spouse
in line 2 a	n 1, list all of your codebt again as a codebtor only i 6D), Schedule E/F (Official	ors. Do not include your s f that person is a guaranto	r or cosigner. Make su	re you have listed t	ng with you. List the person shown he creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	lumn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
83I Sai	lly Kent 3 Grandview Street nta Cruz, CA 95060 n-filing spouse			■ Schedule D, □ Schedule E/F □ Schedule G □ Home Point Fire	

c if this is: n amended filing supplement showing postpetition chapter income as of the following date:
M / DD/ YYYY
12/15
3

Describe Employment Part 1: 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ■ Employed ☐ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Parole Administrator** Include part-time, seasonal, or **Employer's name Dept of Corrections** self-employed work. **Employer's address** Occupation may include student 9825 Goethe Road #200 or homemaker, if it applies. Sacramento, CA 95827

12 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

How long employed there?

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

2. \$ 11,745.00 \$ N/A
3. +\$ 0.00 +\$ N/A
4. \$ 11,745.00 \$ N/A

For Debtor 1

For Debtor 2 or

Debt	or 1	Angela Christine Kent	_	(Case number (if kn	own	') –	 		
					For Debtor 1			ebtor	2 or	
	Cop	by line 4 here	4.		\$ 11,745	.00	<u> </u>	\$	N/A	<u>. </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$ 1,830	-00	0	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$ 1,385			\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c		_	.00	_	\$ 	N/A	_
	5d.	Required repayments of retirement fund loans	5d	l.		.00	_	\$	N/A	_
	5e.	Insurance	5e	١.	\$ 228	.00)	\$	N/A	<u></u>
	5f.	Domestic support obligations	5f.		\$ 0	.00)	\$	N/A	<u> </u>
	5g.	Union dues	5g	١.	\$ 167	.00	<u> </u>	\$	N/A	<u>.</u>
	5h.	Other deductions. Specify: Metro Life	5h	.+	\$ 32	.00) +	\$	N/A	<u></u>
		Persred			\$ 113	.00)	\$	N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 3,755	.00)	\$ 	N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$7,990	.00)	\$	N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	١.	\$0	.00)	\$	N/A	<u>\</u>
	8b.	Interest and dividends	8b	١.	\$ 0	.00)	\$	N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c		\$ 987			\$	N/A	_
	8d.	Unemployment compensation	8d			.00	_	\$ 	N/A	_
	8e.	Social Security	8e	٠.	\$0	.00	<u>)</u>	\$	N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$ 0	.00	0	\$	N/A	\
	8g.	Pension or retirement income	 8g	١.	\$ 0	.00	<u> </u>	\$	N/A	<u> </u>
	8h.	Other monthly income. Specify:	8h	.+	\$ 0	.00	+	\$	N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$987	.00)	\$	N/	Α
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$	8,977.00	+	\$	N/A	= \$	8,977.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	,	L				
11.	othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depe					hedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	8,977.00
									Combi	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	1?						month	ly income
		Yes. Explain: Debtor recently received a raise 2 months prior Debtor adjusted her withholding so she won't or								. Also,

Fill	in this informat	tion to identify yo	our case:					
Deb	otor 1	Angela Chris	stine Ker	nt		Chec	k if this is:	
Dob	otor 2						An amended filing	ing postpotition abouter
	ouse, if filing)						A supplement snow 13 expenses as of t	ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF CALIFO	DRNIA	Ī	MM / DD / YYYY	
Cas	e number							
(If k	nown)							
O	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	nses				12/15
Be info	as complete a	and accurate as	possible eded, atta	. If two married people a ch another sheet to this				
Par 1.	t 1: Descr Is this a join	ibe Your House it case?	hold					
	■ No. Go to	line 2.						
	_		ın a separ	ate household?				
	□ No		st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.			Daughter		15	■ Yes
					Father		70	□ No ■ Yes
								□ No
								Yes
								□ No □ Yes
3.	Do your exp	enses include		No				□ res
		people other to your depende	han $_{m \sqcap}$	Yes				
exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance cluded it on <i>Schedule I:</i>			Your expe	enses
4.		r home owners		uses for your residence.	Include first mortgage	e 4. \$		3,408.00
	If not includ	•	3					
		state taxes				10 °C		0.00
		istate taxes rty, homeowner's	s. or renter	's insurance		4a. \$ 4b. \$		0.00
		•		upkeep expenses		4c. \$		50.00
	4d. Home	owner's associat	ion or con	dominium dues		4d. \$		0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

Deb	tor 1	Angela Christine Kent	Case num	ber (if known)	
6.	Utiliti	ion			
0.	6a.	Electricity, heat, natural gas	6a.	\$	200.00
	6b.	Water, sewer, garbage collection	6b.		150.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	130.00
	6d.	Other. Specify:	6d.		0.00
7.		I and housekeeping supplies	ou. 7.	· -	
7. 8.		dcare and children's education costs	7. 8.		700.00
		ning, laundry, and dry cleaning	9.	·	160.00
9. 10		onal care products and services	9. 10.		90.00
		•		·	52.00
11.		cal and dental expenses	11.	\$	30.00
12.		sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	300.00
13		rtainment, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
		itable contributions and religious donations	14.		216.00
		rance.		Ψ	210.00
10.		ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	\$	0.00
	15b.	Health insurance	15b.	\$	0.00
		Vehicle insurance	15c.		108.00
		Other insurance. Specify:	15d.	·	0.00
16		s. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
	Spec		16.	\$	0.00
17.		Illment or lease payments:		· -	<u> </u>
		Car payments for Vehicle 1	17a.	\$	0.00
		Car payments for Vehicle 2	17b.	\$	0.00
		Other. Specify: Student Loan payments	17c.	\$	453.00
		Other. Specify: 401K direct repayment	17d.	\$	730.00
18.		payments of alimony, maintenance, and support that you did not report as		*	
		icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19.		r payments you make to support others who do not live with you.		\$	0.00
	Spec	ify:	19.		
20.	Othe	r real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.	
	20a.	Mortgages on other property	20a.	\$	0.00
	20b.	Real estate taxes	20b.	\$	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	21.	+\$	0.00
22.		ulate your monthly expenses			
		Add lines 4 through 21.		\$	6,827.00
	22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	6,827.00
23	Calci	ulate your monthly net income.			
20.		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,977.00
		Copy your monthly expenses from line 22c above.			
	۷۵۵.	Copy your monthly expenses from the 220 above.	23b.	-φ	6,827.00
	230	Subtract your monthly expenses from your monthly income.			
	250.	The result is your <i>monthly net income</i> .	23c.	\$	2,150.00
				L	
24.	Do y	ou expect an increase or decrease in your expenses within the year after y	ou file this	s form?	
		xample, do you expect to finish paying for your car loan within the year or do you expect you	ur mortgage	payment to increase	e or decrease because of a
		ication to the terms of your mortgage?			
	■ No				
	$\Box \vee$	Evolain here:			

Yes. Explain here

	s information to identify your case:		
Debtor 1	Angela Christine Kent		
	First Name Middle Nam	ne Last Name	
Debtor 2			
(Spouse if, t	iling) First Name Middle Nam	ne Last Name	
United S	ates Bankruptcy Court for the: EASTERN DIS	STRICT OF CALIFORNIA	
Case nui	mber		
(if known)			☐ Check if this is an
			amended filing
	<u> Form 106Dec</u> aration About an Indivi	idual Debtor's Schedul	es 12/15
If two ma	rried people are filing together, both are equa	ally responsible for supplying correct informa	ition.
obtaining	file this form whenever you file bankruptcy s money or property by fraud in connection wi both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	rith a bankruptcy case can result in fines up to	
	Sign Below		
Did	Sign Below you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy f	orms?
Did		T an attorney to help you fill out bankruptcy f	orms?
Did ■	you pay or agree to pay someone who is NO	At	orms? tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
■□	you pay or agree to pay someone who is NOT	At	tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
■ □ Undenthat	you pay or agree to pay someone who is NOT NO NO Yes. Name of personer penalty of perjury, I declare that I have read they are true and correct.	At De de the summary and schedules filed with this c	tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
Undithat	you pay or agree to pay someone who is NOT NO NO Yes. Name of person er penalty of perjury, I declare that I have read they are true and correct.	At	tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)
Under that	you pay or agree to pay someone who is NOT NO NO Yes. Name of personer penalty of perjury, I declare that I have read they are true and correct.	At De described with this of the summary and schedules filed with the schedules f	tach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119)

Fill	in this inform	nation to identify you	r case:					
	btor 1	Angela Christine						
		First Name	Middle Name	Last Name				
	btor 2 buse if, filing)	First Name	Middle Name	Last Name				
Uni	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	CALIFORNIA				
Co	aa numbar							
1	se number nown)				-	heck if this is an mended filing		
Of	ficial Fo	rm 107						
			Affairs for Individ	duals Filing for B	ankruptcy	4/19		
info nun	rmation. If months	ore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup y additional pages, write you			
Pa			arital Status and Where You	Lived Before				
1.	What is your	current marital statu	ıs?					
	MarriedNot mar	ried						
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?				
	■ No □ Yes. List	s. List all of the places you lived in the last 3 years. Do not include where you live now.						
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
3. stat					ity property state or territory ico, Texas, Washington and W			
	□ No							
	_	ke sure you fill out Sci	hedule H: Your Codebtors (Ot	ficial Form 106H).				
Pa	rt 2 Explain	n the Sources of You	r Income					
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?		
	□ No							
	Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$77,468.00	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Debtor 1 Ar	ngela Chris	tine Kent			Cas	se number (if known)	-	
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.		s income re deductions and sions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
For last caler (January 1 to		31, 2018)	■ Wages, commissions, bonuses, tips		\$107,179.00	☐ Wages, combonuses, tips	nmissions,	
			☐ Operating a business			☐ Operating a	business	
For the calen (January 1 to			■ Wages, commissions, bonuses, tips		\$101,887.00	☐ Wages, combonuses, tips	nmissions,	
			☐ Operating a business			☐ Operating a	business	
List each	•	he gross inco	se and you have income that one from each source separa	•		•		
			Debtor 1			Debtor 2		
			Sources of income Describe below.	each	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankrup	tcy			
6. Are eithe ☐ No.	Neither De	btor 1 nor ['s debts primarily consume Debtor 2 has primarily cons a personal, family, or househo	umer deb	ots. Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by ar
	During the No.	90 days befo	ore you filed for bankruptcy, d	id you pa	y any creditor a tota	al of \$6,825* or mo	re?	
	□ Yes	List below of paid that cr	each creditor to whom you pa editor. Do not include payme	nts for do	mestic support obli			
	* Subject t		payments to an attorney for t t on 4/01/22 and every 3 year			or after the date o	of adjustment	
■ Yes.			or both have primarily const ore you filed for bankruptcy, d			al of \$600 or more	?	
	□ No.	Go to line 7	7.					
	■ Yes	include pay	each creditor to whom you pa ments for domestic support c this bankruptcy case.					
Creditor	's Name and	I Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
Attn: Co 11511 L	Point Finan orrespond una Road s Branch,	ence Dept Suite 200	•		\$3,408.00	\$523,559.00	■ Mortgae □ Car □ Credit (□ Loan R □ Supplie	Card

☐ Other__

Debtor 1 Angela Christine Kent		Case number (if known)						
	Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this pa	yment for		
	LendingClub Attn: Bankruptcy 71 Stevenson St, Ste 1000 San Francisco, CA 94105	Monthly	paid \$688.00	still owe \$29,167.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	ard payment		
	IRS PO Box 7346 Philadelphia, PA 19101	Monthly	\$275.00	\$27,300.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ■ Other _ IR	ard payment s or vendors		
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. In alimony.	artners; relatives of any gern control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for		
	Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	nny property on a	ccount of a do	ebt that benefited an		
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name		
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?		
	■ No. Go to line 11. □ Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the property		

Explain what happened

Deb	tor 1	Angela Christine Kent		Case number	(if known)				
		in 90 days before you filed for bankr unts or refuse to make a payment be		did any creditor, including a bank or financial in you owed a debt?	stitution, set off any a	amounts from your			
	_	No							
		Yes. Fill in the details.							
	Cred	ditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount			
		in 1 year before you filed for bankrup t-appointed receiver, a custodian, or		vas any of your property in the possession of an eer official?	assignee for the bene	efit of creditors, a			
	_	No							
		Yes							
Part	5:	List Certain Gifts and Contributions	8						
13.	Withi	in 2 years before you filed for bankru	ıptcy,	did you give any gifts with a total value of more t	han \$600 per person	?			
	■ No								
		Yes. Fill in the details for each gift.							
		s with a total value of more than \$60 person	0	Describe the gifts	Dates you gave the gifts	Value			
		son to Whom You Gave the Gift and ress:							
14.		No		did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?			
	Yes. Fill in the details for each gift or contribution.								
	more Chai	s or contributions to charities that to e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value			
Part	t 6:	List Certain Losses							
	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?								
	_	No							
		Yes. Fill in the details.	D	the and the last	D-1	Malara of managements			
		cribe the property you lost and the loss occurred		ibe any insurance coverage for the loss e the amount that insurance has paid. List pending	Date of your Value of proloss				
				nce claims on line 33 of Schedule A/B: Property.					
Pari	7:	List Certain Payments or Transfers							
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	_	No							
		Yes. Fill in the details.			_				
	Add Ema	il or website address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Law 110 Sac	son Who Made the Payment, if Not Y v Office of Mo Mokarram 1 Fulton Avenue ramento, CA 95825 @sacbkhelp.com	ou	Attorney Fees	2019	\$1,000.00			

Debtor 1	Angela	Christine	Kent

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.								
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid	Description and w	alue of any prom		Data naumant	A marint of			
	Address	Description and variansferred	aide of any prop	erty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi			sfer any prop	perty to anyone, other	than property			
	Include both outright transfers and transfers made include gifts and transfers that you have already limits. No		ne granting of a s	security interes	st or mortgage on your	property). Do not			
	Yes. Fill in the details.								
		Description and w	alue of	Decaribe		Data transfer was			
	Person Who Received Transfer Address	Description and va property transferr			any property or received or debts change	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)								
	■ No □ Yes. Fill in the details.								
	Name of trust	Description and value of the property transfer			red	Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Sto	rage Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	No	uons, and other iman	ciai ilistitutions	•					
	Yes. Fill in the details.								
		ast 4 digits of	Type of accoun	nt or Da	ite account was	Last balance			
		ccount number	nber instrument		osed, sold, oved, or insferred	before closing or transfer			
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any	y safe deposi	t box or other deposit	tory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution	Who else had acc	ass to it?	Describe the	contents	Do you still			
	Address (Number, Street, City, State and ZIP Code)	Address (Number, St State and ZIP Code)			Contents	have it?			
22.	Have you stored property in a storage unit or p	place other than your	home within 1 y	ear before yo	ou filed for bankruptc	y?			
	■ No								
	☐ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City,		Describe the	Do you still have it?				
		State and ZIP Code)							

Debtor 1	Angela	Christine	Kent
----------	--------	-----------	------

Case number (if known)

Pa	t 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust					
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Pa	t 10: Give Details About Environmental Inform	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	- ·						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	l sites.							
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.						
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pa	t 11: Give Details About Your Business or Cor	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing execu	tive of a corporation							
	An owner of at least 5% of the veting or equity securities of a corneration								

Debtor 1 Angela Christine Kent		Case number (if known)
No. None of the above applies	s. Go to Part 12.	
☐ Yes. Check all that apply above	ve and fill in the details below for each busin	ess.
Business Name Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeep	Do not include Social Security number or ITIN.
28. Within 2 years before you filed for institutions, creditors, or other par		ent to anyone about your business? Include all financial
■ No □ Yes. Fill in the details below.		
Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Part 12: Sign Below		
are true and correct. I understand that	making a false statement, concealing proper nes up to \$250,000, or imprisonment for up to	, and I declare under penalty of perjury that the answers ty, or obtaining money or property by fraud in connection o 20 years, or both.
Angela Christine Kent	Signature of Debtor 2	
Signature of Debtor 1		
Date _July 8, 2019	Date	
Did you attach additional pages to You ■ No □ Yes	r Statement of Financial Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?
■ No	who is not an attorney to help you fill out ban	

Fill in this information to identify your case:							
Debtor 1	Angela Christine Kent						
Debtor 2 (Spouse, if filing)							
United States Bankruptcy Court for the: _Eastern District of California							
Case number (if known)							

Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	11: Calculate Your Average Monthly Income								
1.	What is your marital and filing status? Check one	only.							
	☐ Not married. Fill out Column A, lines 2-11.								
	■ Married. Fill out both Columns A and B, lines 2-1	1.							
10 the	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6 ie 6 months, add the income for all 6 months and divide the to couses own the same rental property, put the income from that	i-month per tal by 6. Fi	riod would Il in the re	l be March 1 throusult. Do not includ	ugh Au de any	igust 31. If the amo income amount m	ount of you ore than o	ur monthly income va once. For example, if	aried during both
						ımn A tor 1	Colum Debto non-fi		
	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$	12,213.33	\$	0.00	
	 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 				\$	0.00	\$	0.00	
	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.					0.00	\$	0.00	
	Net income from operating a business, profession, or farm	Debtor	1						
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	-\$	0.00						
	Net monthly income from a business, profession, or f	arm \$	0.00	Copy here ->	\$	0.00	\$	0.00	
6.	Net income from rental and other real property	Debtor	1						
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	- \$ _	0.00						
	Net monthly income from rental or other real property	, \$	0.00	Copy here ->	\$	0.00	\$	0.00	

Debtor 1	Angela Christine Kent		Case number	er (<i>if known</i>)			
			Column A Debtor 1		Column B Debtor 2	or	
7. I r	nterest, dividends, and royalties		\$	0.00	\$	0.00	
8. U	nemployment compensation		\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount received was a bene se Social Security Act. Instead, list it here:	efit unde	er				
		0.00					
		0.00					
b	ension or retirement income. Do not include any amount received that we enefit under the Social Security Act.		\$	0.00	\$	0.00	
D re d	ncome from all other sources not listed above. Specify the source and a continct on not include any benefits received under the Social Security Act or payme exceived as a victim of a war crime, a crime against humanity, or international comestic terrorism. If necessary, list other sources on a separate page and patal below.	ents al or	\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	. \$	0.00	\$	0.00	
	alculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B.	\$	12,213.33	+ \$_	0.00	Tot	12,213.33
13. C	opy your total average monthly income from line 11. alculate the marital adjustment. Check one:					\$	12,213.33
_	•						
•	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse						
	Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.					•	
	If this adjustment does not apply, enter 0 below.						
		_ \$_					
		_ \$_					
		_					
	Total	\$_	0.0	0 Co	ppy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	12,213.33
15.	Calculate your current monthly income for the year. Follow these steps	s:					40.040.55
	15a. Copy line 14 here=>					\$	12,213.33
	Multiply line 15a by 12 (the number of months in a year).					X	12
	15b. The result is your current monthly income for the year for this part of	the forn	n			\$1	46,559.96

Debto	Angela Christine Kent		Case number (if known)	
16.	Calculate the median family income that applies to	you. Follow these steps:		
	16a. Fill in the state in which you live.	CA		
	16b. Fill in the number of people in your household.	4		
	16c. Fill in the median family income for your state and	size of household		¢ 96,813.00
	To find a list of applicable median income amount instructions for this form. This list may also be ava	s, go online using the link sp		\$96,613.00
17.	How do the lines compare?			
	17a. Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). Go to Part 3. Do I			
	17b. Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your Disposable		
Part	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Copy your total average monthly income from line	11 .		12,213.33
19.	Deduct the marital adjustment if it applies. If you are contend that calculating the commitment period under spouse's income, copy the amount from line 13.			
	19a. If the marital adjustment does not apply, fill in 0 or	ı line 19a.	-9	0.00
	19b. Subtract line 19a from line 18.			\$12,213.33_
20.	Calculate your current monthly income for the year	. Follow these steps:		
	20a. Copy line 19b			\$12,213.33
	Multiply by 12 (the number of months in a year).			x 12
	20b. The result is your current monthly income for the y	ear for this part of the form		\$ 146,559.96
	20c. Copy the median family income for your state and	size of household from line	16c	\$ 96,813.00
	21. How do the lines compare?			
	Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the court, on	the top of page 1 of this form, check b	ox 3, The commitment
	■ Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordered by	the court, on the top of page 1 of this for	orm, check box 4, The
Part	4: Sign Below			
	By signing here, under penalty of perjury I declare that	the information on this state	ment and in any attachments is true a	nd correct.
X	/s/ Angela Christine Kent			
	Angela Christine Kent Signature of Debtor 1			
	Date July 8, 2019 MM / DD / YYYY			
	f you checked 17a, do NOT fill out or file Form 122C-2			
	If you checked 17b, fill out Form 122C-2 and file it with	this form. On line 39 of that	form, copy your current monthly incon-	ne from line 14 above.

Fill in this information to identify your case:	
Debtor 1 Angela Christine Kent	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Eastern District of California	
Case number(if known)	☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,786.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

ople v	vho are under 65 years of age							
•	Out-of-pocket health care allowance per person	\$	55					
	Number of people who are under 65	X 3	<u> </u>					
	Subtotal. Multiply line 7a by line 7b.	\$ 165.	00	Copy here	e=> \$	165.0	00	
ople v	vho are 65 years of age or older							
7d.	Out-of-pocket health care allowance per person	\$ 1	14					
	Number of people who are 65 or older	X 1	<u> </u>					
7f.	Subtotal. Multiply line 7d by line 7e.	\$ 114.	00	Copy here	e=> \$	114.0	00	
7g.	Total. Add line 7c and line 7f		\$	279.00		Copy total he	re=> \$_	279.00
nkrup Hous Hous	tcy purposes into two parts: ing and utilities - Insurance and operating exper ing and utilities - Mortgage or rent expenses	nses		S Local Stand				
Hous Hous answ parate	tcy purposes into two parts: ing and utilities - Insurance and operating exper	nses ee Program char be available at thenses: Using the	t. To find ne bankru number	I the chart, go uptcy clerk's c	online	e using the li		
Housi Housi answ parate Hou in th	tcy purposes into two parts: ing and utilities - Insurance and operating exper ing and utilities - Mortgage or rent expenses er the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also busing and utilities - Insurance and operating exp	nses ee Program char be available at thenses: Using the	t. To find ne bankru number	I the chart, go uptcy clerk's c	online	e using the li	nk speci	
Housi Housi answ parate Hou in th	ing and utilities - Insurance and operating expering and utilities - Mortgage or rent expenses for the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also busing and utilities - Insurance and operating experied dollar amount listed for your county for insurance	nses ee Program char be available at thenses: Using the and operating ex	t. To find ne bankru number openses.	I the chart, go uptcy clerk's c	online	e using the li	nk speci	
Housi Housi answ parate Hou in th Hou 9a.	ing and utilities - Insurance and operating expering and utilities - Mortgage or rent expenses for the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be using and utilities - Insurance and operating experied dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5,	nses ee Program char be available at thenses: Using the and operating ex fill in the dollar ares.	t. To find ne bankru e number xpenses. mount	I the chart, go uptcy clerk's o of people you	online office. entered	e using the li	nk speci	
Housi Housi answ parate Hou in th Hou 9a.	ing and utilities - Insurance and operating expering and utilities - Mortgage or rent expenses are the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be using and utilities - Insurance and operating experied dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.	ee Program char be available at thenses: Using the and operating ex fill in the dollar ares. and other debts sidd all amounts the	t. To find ne bankru e number xpenses. mount secured by	I the chart, go uptcy clerk's o of people you	online office. entered	e using the li	nk speci	
House House answ parate Hou in th Hou 9a.	ing and utilities - Insurance and operating expering and utilities - Mortgage or rent expenses or the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be using and utilities - Insurance and operating experied dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages are to calculate the total average monthly payment, a contractually due to each secured creditor in the 6	ee Program char be available at thenses: Using the and operating ex fill in the dollar ares. and other debts sidd all amounts the	t. To find ne bankru e number xpenses. mount secured by nat are bu file	I the chart, go uptcy clerk's o of people you	online office. entered	e using the li	nk speci	
Housi Housi answ parate Hou in th Hou 9a.	ing and utilities - Insurance and operating expering and utilities - Mortgage or rent expenses are the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be using and utilities - Insurance and operating experied dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages are contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	ee Program char be available at thenses: Using the and operating ex fill in the dollar ares. and other debts s dd all amounts th 0 months after you	t. To find ne bankru e number xpenses. mount secured by nat are bu file	I the chart, go uptcy clerk's of of people you y your home.	online office. entered	e using the li	nk speci	
Housi Housi answ parate Hou in th Hou 9a.	ing and utilities - Insurance and operating expering and utilities - Mortgage or rent expenses are the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be using and utilities - Insurance and operating experied dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages are to calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	ee Program char be available at thenses: Using the and operating example of the second	t. To find ne bankru e number xpenses. mount secured by nat are bu file	I the chart, go uptcy clerk's o of people you y your home.	online office. entered	e using the li	s Rep	663.
Housi Housi answ parate Hou in th Hou 9a.	ing and utilities - Insurance and operating expering and utilities - Mortgage or rent expenses are the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also be using and utilities - Insurance and operating experied dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages are contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor Home Point Financial Corporation	ee Program char be available at thenses: Using the and operating example of the second	t. To find the bankrus anumber spenses. The mount secured by the s	the chart, go uptcy clerk's of people you by your home.	online office. entered	e using the lid in line 5, fill	s Rep	663.0

Explain why: _

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Debtor 1	Angela Christine Kent		Case number (if known)		
11.	Local transportation expenses: Check the number of vehic	les for which you claim a	n ownershi	p or operating	g expense.	
	☐ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	■ 2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for y					410.00
13.	Vehicle ownership or lease expense: Using the IRS Local S You may not claim the expense if you do not make any loan of more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1:					
13a	. Ownership or leasing costs using IRS Local Standard		\$	0.00		
13b	. Average monthly payment for all debts secured by Vehicle 1.					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60.					
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$	Copy here =>	-\$	Repeat this amount on line 33b.	
13c	. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0,	enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2 Describe Vehicle 2:				_	
13d	. Ownership or leasing costs using IRS Local Standard		\$	508.00		
13e	. Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs for				
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
			Сору		Repeat this	
	Total average monthly payment	\$	here => -\$ _	0.0	mount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0,	enter \$0	. \$	508.00	Copy net Vehicle 2 expense here => \$	508.00
14.	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of w				n the \$	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in wI not claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the app				0.00

Debtor 1	Angela Christine Kent	Case number (if known)	

Oth	er Necessa		addition to the expense due following IRS categories		s listed above,	you are allowed your monthly expense	s for	
16.	self-employ your pay fo and subtra	yment taxes, social or these taxes. How	security taxes, and Medic rever, if you expect to rece to the total monthly amount	are taxes	. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	2,130.00
17.		ry deductions: The	e total monthly payroll dedu	uctions th	at your job red	quires, such as retirement		
				o, such as	s voluntary 40	1(k) contributions or payroll savings.	\$	1,552.00
18.	filing togetl Do not incl	her, include payme	nts that you make for your ife insurance on your depe	spouse's	term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	33.00
19.	administra	tive agency, such a	ne total monthly amount the spousal or child support	payment	S.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20	Education	· —						
		ndition for your job,	, , ,	duodiloii	triat to ottrior i	oquilou.		
	for your	physically or ment	ally challenged dependent	child if n	o public educa	ation is available for similar services.	\$	0.00
21.			amount that you pay for change in the secondary or secondary			sitting, daycare, nursery, and preschool.	\$	0.00
22.	Additional that is required by a health	I health care expensions of the health and savings account. I	nses, excluding insurand and welfare of you or your nclude only the amount th	ce costs: depende at is more	The monthly nts and that is than the total			0.00
	-		e or health savings accour		•		\$	0.00
23.	for you and phone servincome, if income, if income	d your dependents, vice, to the extent n it is not reimbursed lude payments for b	such as pagers, call waiting ecessary for your health a by your employer. basic home telephone, inte	ng, caller nd welfar	identification, e or that of yo cell phone ser	you pay for telecommunication services special long distance, or business cell ur dependents or for the production of vice. Do not include self-employment ount you previously deducted.	+\$	63.00
24.		the expenses allo 6 through 23.	wed under the IRS expe	nse allov	vances.		\$	7,424.00
Add		ense Deductions	These are additional d					
25.		disability insurance				ses. The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health insu	urance		\$	228.00			
	Disability in	nsurance		\$	440.67			
	Health sav	rings account	+	\$	0.00	٦		
	Total			\$	668.67	Copy total here=>	\$	668.67
	Do you act	tually spend this tot	al amount?					
		. How much do you						
	Ye	s		\$				
26.	continue to	pay for the reason chold or member of	able and necessary care a	and suppo o is unab	ort of an elder le to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the		
	, ,	,	under the Family Violence ne nature of these expense			es Act or other federal laws that apply.	\$	0.00

Debtor 1	Angela Christine Kent	Ca	ase number (if I	known)					
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	ce and oper	ating	expense	es on			
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy colergy costs	sts included	d in ex	penses	on lin	ie		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must ry.	show that t	the ad	lditional			\$	0.00
		ren who are younger than 18. The monthly pendent children who are younger than 18 y							
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must ot already accounted for in lines 6-23.	explain wh	y the	amount				
	* Subject to adjustment on 4/01/22, and even	ery 3 years after that for cases begun on or a	after the dat	te of a	djustme	nt.		\$	160.00
		ne monthly amount by which your actual foo allowances in the IRS National Standards. s in the IRS National Standards.							
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.								
	You must show that the additional amount claimed is reasonable and necessary.								0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute nization. 11 U.S.C. § 548(d)(3) and (4).	in the form	of cas	h or fina	ancial			
	Do not include any amount more than 15%	of your gross monthly income.						\$	216.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.					\$	S	1,044.67
Ded	uctions for Debt Payment								
	For debts that are secured by an interest oans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	e mortgage	s, vel	nicle				
	To calculate the total average monthly paym creditor in the 60 months after you file for ba	ent, add all amounts that are contractually dinkruptcy. Then divide by 60.	ue to each	secur	ed				
	Mortgages on your home								monthly
33a.	Copy line 9b here					=>	\$	ymen	3,408.00
	Loans on your first two vehicles						•		<u> </u>
33b.	Conviling 12h hora					=>	\$		0.00
33c.	Conviling 12g hore						\$ \$		0.00
							Ψ_		0.00
33d. Nam	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude taxonsuranc	es			
					No				
	IRS	Personal property lien			Yes		\$		1.00
							Ψ_		
					No				
					Yes		\$_		
					No				
					Yes		+\$		
						7	Ī		
33e	Total average monthly payment. Add lines	33a through 33d	\$	3,40	9.00	Cop total here	ĺ	\$	3,409.00

Debtor 1	Ang	ela Christine Kent			Ca	se nu	ımber (<i>if known</i>)			
		debts that you listed in line property necessary for you				e,				
	No.	Go to line 35.								
] Yes.	State any amount that you listed in line 33, to keep pos Next, divide by 60 and fill in	ssession of your property (c							
Nam	e of the	creditor	Identify property that secur	res the de	ebt	То	tal cure amount		Monthly amount	
-NO	NE-				\$	S _		÷ 60 = \$		
								Copy		
					Total	\$	0.00	here=	»	0.00
		owe any priority claims - su due as of the filing date of				hat				
	No.	Go to line 36.								
	Yes.	Fill in the total amount of all ongoing priority claims, suc			ude current or					
		Total amount of all past-do	ue priority claims			\$	14,400.00	÷ 60	\$_	240.00
36. P ı	rojecte	d monthly Chapter 13 plan	payment			\$	172.00			
O th To	office of the Exector of find a l	nultiplier for your district as s the United States Courts (for utive Office for United States ist of district multipliers that inclu- nstructions for this form. This list	r districts in Alabama and N s Trustees (for all other distr des your district, go online using	orth Cardicts). g the link	olina) or by specified in the	X .	8.00			
A	verage	monthly administrative expense	nse				\$13.76_	Copy to		13.76
		of the deductions for debtes 33e through 36.	payment.						\$	3,662.76
Total	Deduc	tions from Income								
38. A	dd all d	of the allowed deductions.								
		ne 24, All of the expenses all e allowances	owed under IRS	\$	7,424.0	0				
(Copy lir	ne 32, All of the additional ex	pense deductions	\$	1,044.6	7				
(Copy lir	ne 37, All of the deductions fo	or debt payment	+\$_	3,662.7	6	٦			
7	Total de	eductions		\$	12,131.4	3	Copy total here=>		\$	12,131.43

Debtor 1	Ang	gela Christ	ine Kent		Ca	ase nu	ımber (<i>if known</i>)		
Part 2:	De	etermine You	ur Disposable Income Under 11 U	J.S.C. § 1325	(b)(2)				
			rent monthly income from line 1-			d.		\$	12,213.33
((r	childrer disability received	 The month payments for in accordant 	olly necessary income you received ally average of any child support payor a dependent child, reported in Parace with applicable nonbankruptcy lended for such child.	ments, foster art I of Form	r care payments, or 122C-1, that you		\$ 0	0.00	
i	41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).						\$	0.00	
42. 1	Total of	all deduction	ons allowed under 11 U.S.C. § 70	7(b)(2)(A). Co	opy line 38 here	=>	\$ 12,131	.43	
t	expense their exp	es and you have benses. You	ial circumstances. If special circu ave no reasonable alternative, desi must give your case trustee a deta locumentation for the expenses.	cribe the spec	cial circumstances a	and			
Des	cribe th	e special ci	rcumstances		Amount of exp	oens	е		
					\$		_		
					\$		_		
					- <u> </u>		_		
					_ `		_		
				Total \$	0.00		Copy nere=> \$ 	0.00	
44. 1	Total ac	djustments.	Add lines 40 through 43.		=>	\$_	12,861.43	Copy here=> -\$	12,861.43
45. (Calcula	te your mon	nthly disposable income under §	1325(b)(2). S	Subtract line 44 from	line	39.	\$	-648.10
t t	Change have chatime you you filed	e in income of anged or are ur case will be If your petition	or expenses. If the income in Form a virtually certain to change after the e open, fill in the information below n, check 122C-1 in the first column, in when the increase occurred, and	e date you file . For example , enter line 2 i	ed your bankruptcy p e, if the wages repor n the second colum	petition rted in, ex	on and during the ncreased after		
Form	n	Line	Reason for change		Date of chang	je	Increase or decrease?	Amount o	f change
☐ 12 ☐ 12 ☐ 12 ☐ 12	22C-1 22C-2 22C-1 22C-2 22C-1 22C-2 22C-1						☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase	\$ \$	
	22C-2		<u>-</u>				☐ Decrease	\$	

Debtor 1	Angela Christine Kent	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the info	rmation on this statement and in any attachments is true and correct.
X	/s/ Angela Christine Kent Angela Christine Kent	
	Signature of Debtor 1	

Debtor 1	Angola	Christine Kent	
Deptor 1	Angela	Christine Kent	

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2019 to 06/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Child Support** Constant income of **\$987.00** per month.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Dept of Correction**

Income by Month:

6 Months Ago:	01/2019	\$10,967.00
5 Months Ago:	02/2019	\$10,967.00
4 Months Ago:	03/2019	\$10,967.00
3 Months Ago:	04/2019	\$10,967.00
2 Months Ago:	05/2019	\$11,745.00
Last Month:	06/2019	\$11,745.00
	Average per month:	\$11,226.33

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
<u>+</u> \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_fo

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California

In re	Angela Christine Kent	Case No.	
	Debtor(s	Chapter	13
	DISCLOSURE OF COMPENSATION OF	ATTORNEY FOR D	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I as compensation paid to me within one year before the filing of the petition in be rendered on behalf of the debtor(s) in contemplation of or in connection we	bankruptcy, or agreed to be pai	d to me, for services rendered or to
	For legal services, I have agreed to accept	\$	4,000.00
	Prior to the filing of this statement I have received		1,000.00
	Balance Due	\$	3,000.00
2.	\$_310.00 of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
6.	■ I have not agreed to share the above-disclosed compensation with any or copy of the agreement, together with a list of the names of the people shall return for the above-disclosed fee, I have agreed to render legal service for a. Analysis of the debtor's financial situation, and rendering advice to the debtor. Preparation and filing of any petition, schedules, statement of affairs and c. Representation of the debtor at the meeting of creditors and confirmation d. [Other provisions as needed] Negotiations with secured creditors to reduce to market	or persons who are not member haring in the compensation is at or all aspects of the bankruptcy lebtor in determining whether to plan which may be required; in hearing, and any adjourned he value; exemption planning	rs or associates of my law firm. A stached. case, including: o file a petition in bankruptcy; earings thereof; g; preparation and filing of
7.	reaffirmation agreements and applications as needed; pr 522(f)(2)(A) for avoidance of liens on household goods; r By agreement with the debtor(s), the above-disclosed fee does not include the	motion for relief from autone following service:	matic stay.
	Representation of the debtors in any dischargeability act CERTIFICATIO	<u> </u>	ry proceeding.
	I certify that the foregoing is a complete statement of any agreement or arran bankruptcy proceeding.		representation of the debtor(s) in
J		Mokarram	
	Law Off 1101 Fu Sacram 888.588	karram The of Attorney fice of Mo Mokarram The of Mo Mokarram The of Mo Mokarram The of Mo Mokarram The of Mok	

Name of law firm

Kent, Angela - - Pg. 1 of 2

Affirm Inc Affirm Incorporated Po Box 720 San Francisco, CA 94104

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citibank
Attn: Recovery/Centralized Bankruptcy
Po Box 790034
St Louis, MO 63179

Citibank/The Home Depot Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850

FedLoan Servicing Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106 Kent, Angela - - Pg. 2 of 2

Franchise Tax Board PO Box 2952 Sacramento, CA 95812

Home Point Financial Corporation Attn: Correspondence Dept 11511 Luna Road; Suite 200 Farmers Branch, TX 75234

IRS PO Box 7346 Philadelphia, PA 19101

Kelly Kent 83B Grandview Street Santa Cruz, CA 95060

LendingClub Attn: Bankruptcy 71 Stevenson St, Ste 1000 San Francisco, CA 94105

Pay Pal Credit PO Box 105658 Atlanta, GA 30348

Synchrony Bank/Gap Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony/Ashley Furniture Homestore C/o Po Box 965036 Orlando, FL 32896

USAA Federal Savings Bank Attn: Bankruptcy 10750 Mcdermott Freeway San Antonio,, TX 78288